

**KOESTNER BERTANI LLP**

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February 28, 2005

**MAIL STOP AMENDMENT**Commissioner For Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Inventor(s): John M. Morgenstern; Alan E. Arslan  
 Title: Mach Weighted Area Ruling For Supersonic Vehicles  
 Appln No.: 10/706,673  
 Filing Date: Nov. 11, 2003  
 Docket No. 1023.P023US  
 Examiner: Collins, Timothy  
 Art Unit: 3643

Enclosed herewith for filing is as follows:

1. Transmittal Letter (in duplicate)
2. Response to Office Action Dated October 29, 2004 (6 pages)
3. Petition for 1-month Extension of Time
4. Information Disclosure Statement Under 37 CFR § 1.97(c)
5. Form PTO/SB/08
6. Copy of References Cited (1 reference)

☒ The fee has been calculated as shown below

	Claims Remaining After Amendment		Highest No. Previously Paid For		Present Extra		Rate		Additional Fee
Total Claims	10	Minus	26	=	0	x	\$50.00	\$	0.00
Independent Claims	1	Minus	3	=	0	x	\$200.00	\$	0.00
<input checked="" type="checkbox"/> Fee for Request for Extension of Time								\$	120.00
<input checked="" type="checkbox"/> Fee for Information Disclosure Statement								\$	180.00
<b>Total additional fee to be paid with attached credit card form:</b>								\$	<u>300.00</u>
<input type="checkbox"/> Conditional Petition for Extension of Time: If an extension of time is required for timely filing of the enclosed document(s) after all papers filed with this transmittal have been considered, an extension of time is hereby requested.								\$	
<input checked="" type="checkbox"/> Also, charge any additional fees required and credit any overpayment to our Deposit Account No. 50-2240									

I hereby certify that this correspondence is being facsimile transmitted to the USPTO, Central Number at (703) 872-9306 on the date shown below:

*Mary Jo Bertani*  
(Signature)

Mary Jo Bertani  
(Printed Name of Person Signing Certificate)

February 28, 2005  
(Date)

Respectfully submitted,

*Mary Jo Bertani*

Mary Jo Bertani  
Attorney for Applicant(s)  
Reg. No. 42,321

www.kbpatents.com

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Total Claims	10	Minus	26	=	0	x	\$50.00	\$	0.00
Independent Claims	1	Minus	3	=	0	x	\$200.00	\$	0.00
<input checked="" type="checkbox"/> Fee for Request for Extension of Time								\$	120.00
<input checked="" type="checkbox"/> Fee for Information Disclosure Statement								\$	180.00
<b>Total additional fee to be paid with attached credit card form:</b>								\$	<u>300.00</u>

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